FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
- 1	hours per response	. 0.5								

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

					or Se	ction 3	0(h) of the Ír	rvestme	nt Cor	npany Act o	f 19	940						
1. Name and Address of Reporting Person* Patel Nir Vinay					2. Issuer Name <b>and</b> Ticker or Trading Symbol GameStop Corp. [ GME ]								heck all app	ationship of Reporting Person(s) to call applicable)  Director 10% (				
i morris i iii j															er (give title	10% ( Other		
(Last)	/Ei	rot)	(Middle)		3. Date of Earliest Transaction (Mont						n/Day/Vear)				v)		below)	
(Last) (First) (Middle) C/O GAMESTOP CORP.				07/01/2022						C	Chief Oper	ating Officer						
625 WESTPORT PARKWAY												$\bot$						
				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)											X Form	filed by On	One Reporting Person					
GRAPE	VINE T	<u> </u>	76051										Form Perso		re than One Re	porti	ng	
(City)	(St	ate)	(Zip)											1 013	211			
		Table	e I - No	n-Deriva	tive S	ecui	rities Acq	uired,	Dis	posed of	, o	r Ben	efici	ally Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day			Execution Date,		Transaction Dispose Code (Instr. 5)		Disposed C	ties Acquired (A) I Of (D) (Instr. 3,			nd Securi Benefi Owned	ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount		(A) or (D)	Price		ted action(s) 3 and 4)		(ins	str. 4)
Class A Common Stock 07/01/2				2022		A		112,677 <sup>(1)</sup>		A	\$(	0 11	2,677	D				
Class A Common Stock 07/01/2				2022			A		169,015(2)		A	\$(	0 28	31,692	D			
		Та	ble II -				ies Acqu varrants,								d			
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any		4. Transa Code (I 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			ite Amount of		f 9	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	p o B C t (I	1. Nature of Indirect Beneficial Ownership Instr. 4)			

## **Explanation of Responses:**

1. These shares represent restricted stock units issued to Mr. Patel by the Issuer. The restricted shares are scheduled to vest as follows: 10% on the first anniversary of the grant date, 20% on the second anniversary of the grant date, and 23.333% on each of the third, fourth, and fifth anniversaries following the grant date, subject in each case to his continuous service to the Issuer through the applicable vesting date.

(D)

(A)

Date

Exercisable

Expiration

Date

Title

2. These shares represent restricted stock units issued to Mr. Patel by the Issuer, vesting in equal annual installments on July 1st of each of the years 2023 through 2025, following the grant date, subject in each case to his continuous service to the Issuer through the applicable vesting date.

## Remarks:

/s/ Diana H. Saadeh-Jajeh, Attorney-in-Fact

Amount Number

Shares

07/05/2022

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.